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## EDITORIAL

- Dr. K.S. GUPTA (Editor)
- Dr. E.A. MUGONZIBWA (Asst. Editor)

The fourth issue of the scientific journal of Tanzania Dental Association re-emerges after a protracted gap of thirty-nine months. While it is true that it could be a dynamic mouthpiece of its members viz. Dental Surgeons, Dental Assistants and Dental Technicians, it is indeed disappointing that contributions from members have been scarce. In thirty-nine months a lot of recommendations have been made by the Association but very little achieved in terms of implementation. This issue comes in the wake of AIDS and it is my earnest hope that its columns - objective as they are meant to be - will create an uncompromising consciousness towards providing proper dental care to all patients.

**AIDS IS THE MOST SEVERE CONSEQUENCE OF HUMAN IMMUNODEFICIENCY VIRUS** Infection, characterized by the destruction of the key elements in the patients' immune system resulting in a series of severe and ultimately fatal opportunistic infections and malignancies. According to Mann (1987) HIV has been isolated in blood, semen, vaginal secretions, saliva, tears, breast milk, urine and is likely to be present in other body fluids, secretions and excretions.

Wherever we are - in the districts or regions - we shall persevere to make it our ethical duty to oversee that all instruments/syringes are sterilised according to laid down scientific criteria and minimise if not eliminate all areas of contamination in our places of work. We have to inculcate in the Dental cadres an awareness about the grave implications of spread of infection and be absolutely positive that every time the steriliser is on instruments have been immersed for at least twenty minutes in boiling water. Education of people from all walks of life is the only vaccine available at present to hold AIDS in check.

In the Dental clinic somewhere a needle is being fitted onto the syringe and a local anesthetic solution injected around the oral mucosa. Extraction of a tooth is being attempted. A tooth forceps is taken out of the dental kit and the tooth is removed out of its socket. The tooth is dropped into the waste bucket. The forceps is placed in the water basin. The socket site is held with the thumb and forefinger and pressed. A gauze is applied onto the bleeding socket. Gauze soiled in blood is dropped in the bucket. New gauze piece is applied to the socket site and patient told to bite upon it. The hands of the Dental operator are washed with soap and water. Some blood-drops fall on the instrument tray, some blood splatters on the floor. Have we followed aseptic techniques? Have we put on masks? Have we put on glasses to cover our eyes? Have we put on gloves? Have we disposed off the waste material properly? Have we brushed and cleaned the instruments thoroughly before recycling them for a 20-minute boiling? These are pertinent questions for all Dental cadres who do clinical chores.

Are we true to ourselves? Are we true to our patients? If the answers are mixed and confused, we need to have a 'moral awakening' and a 'reorientation' of our clinical practices.